PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

12/14/2010

HICKMAN PALERMO TRUONG & BECKER/ORACLE

7590

2055 GATEWAY PLACE SUITE 550 SAN JOSE, CA 95110-1083

42425

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Signature)

INSTRUCTIONS: This form should be used for transmitting the ISSUE PEE and PUBLICATION PEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondences including the Patent, advance orders and notification of maintenance fees will be mainled to the turner increase address as inclinated undess correspondence or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "PEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

						- (Date
APPLICATION NO.	FILING DATE	T	FIRST NAMED INVENTOR	1.	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/830,211 TITLE OF INVENTION	04/21/2004 E: COST-BASED OPTIN	MIZER FOR AN XML E	Fei Ge PATA REPOSITORY WIT	HIN A DATABASE	50277-2433	9360
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/14/2011
EXAMINER		ARTUNIT	CLASS-SUBCLASS			
MORRISON, JAY A		2168	707-688000			
CFR 1.353). Change of corrosp Address form PTO/S Proc Address form PTO/S Proc Address form PTO/S PTO/SB47/Rev 03- Number is required. A ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI Oracle	IND RESIDENCE DATA less an assignce is ident thin 37 CFR 3.11. Comp GNEE Internatio	ngc of Correspondence Indication form cd. Use of a Customer A TO BE PRINTED ON fifed below, no assignee pletion of this form is No	(B) RESIDENCE: (CITY ation	3 registered patent reby, e firm (having as a a gont) and the name meys or agents. If norther had been still a massigner assignment, and STATE OR CORE	attorneys 1 Truong 2 2 3 3 2 is identified below, the dountry) 2 3 3 5 2 5 3 6 2 6 3 7 3 7 5 7 6 8 6 8 6 8 7 8 7 8 7 8 7 8 7	A
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent):	Individual 24 Cor	poration or other private gre	oup entity U Governme
4a. The following fee(s) are submitted: 3 Issue Fee 3 Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously guid issue fee shown above) A check is enclosed.			
	itus (from status indicate is SMALL ENTITY stat		b. Applicant is no lon	ger claiming SMAL	L ENTITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee ar	nd Publication Fee (if req	uired) will not be accept	ed from anyone other than t	he applicant; a regis	tered attorney or agent; or the	he assignee or other party

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to like (and by the USPTO to process) an application. Confidentially is governed by 35 USC, 122 and 37 CFR 1.41. This collection is estimated to lake 12 minutes to complete, including gathering, preparing, and the first process of the process of the complete of the complete of the process of the complete of the complete

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

1

Typed or printed name Brian D. Hickman

Authorized Signature

Registration No.

March 1, 2011

35,894